

July 18, 2016

Tom Moe
USS Corporation
P.O. Box 417
8771 Park Ridge Dr
Mountain Iron, MN 55768

RE: Project: NPDES-TB WK1
Pace Project No.: 1269769

Dear Tom Moe:

Enclosed are the analytical results for sample(s) received by the laboratory on July 06, 2016. The results relate only to the samples included in this report. Results reported herein conform to the most current TNI standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Melisa M Woods
melisa.woods@pacelabs.com
Project Manager

Enclosures

cc: Cory Hertling
Terri Sabetti, NTS



REPORT OF LABORATORY ANALYSIS

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CERTIFICATIONS

Project: NPDES-TB WK1

Pace Project No.: 1269769

Virginia Minnesota Certification ID's

315 Chestnut Street, Virginia, MN 55792

Alaska Certification #MN01084

Arizona Department of Health Certification #AZ0785

Minnesota Dept of Health Certification #: 027-137-445

North Dakota Certification: # R-203

Wisconsin DNR Certification # : 998027470

WA Department of Ecology Lab ID# C1007

Nevada DNR #MN010842015-1

Oklahoma Department of Environmental Quality

Duluth Minnesota Certification ID's

4730 Oneota St., Duluth, MN 55807

Minnesota Dept of Health Certification #: 027-137-152

Wisconsin DNR Certification # : 999446800

North Dakota Certification #: R-105

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SAMPLE SUMMARY

Project: NPDES-TB WK1

Pace Project No.: 1269769

Lab ID	Sample ID	Matrix	Date Collected	Date Received
1269769001	SD 001 (Seep 020)	Water	07/06/16 11:20	07/06/16 13:25

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SAMPLE ANALYTE COUNT

Project: NPDES-TB WK1

Pace Project No.: 1269769

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
1269769001	SD 001 (Seep 020)	EPA 1664 TPH	BT1	1	PASI-DUL
		USGS I-3765	BEM	1	PASI-V
		EPA 300.0	CSD	1	PASI-V

REPORT OF LABORATORY ANALYSIS

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ANALYTICAL RESULTS

Project: NPDES-TB WK1

Pace Project No.: 1269769

Sample: SD 001 (Seep 020)		Lab ID: 1269769001		Collected: 07/06/16 11:20		Received: 07/06/16 13:25		Matrix: Water	
Parameters	Results	Units	Report Limit	MDL	DF	Prepared	Analyzed	CAS No.	Qual
1664 SGT-HEM, TPH									
Analytical Method: EPA 1664 TPH									
Total Petroleum Hydrocarbons	ND	mg/L	3.0	1.0	1		07/11/16 16:44		
USGS I-3765 TSS									
Analytical Method: USGS I-3765									
Total Suspended Solids	6.4	mg/L	1.0	1.0	1		07/12/16 12:08		
300.0 IC Anions 28 Days									
Analytical Method: EPA 300.0									
Sulfate	1010	mg/L	20.0	10.0	10		07/13/16 00:24	14808-79-8	

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QUALITY CONTROL DATA

Project: NPDES-TB WK1

Pace Project No.: 1269769

QC Batch: 87251

Analysis Method: EPA 1664 TPH

QC Batch Method: EPA 1664 TPH

Analysis Description: 1664 SGT-HEM, TPH

Associated Lab Samples: 1269769001

METHOD BLANK: 341660

Matrix: Water

Associated Lab Samples: 1269769001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Total Petroleum Hydrocarbons	mg/L	ND	3.0	1.0	07/11/16 14:30	

LABORATORY CONTROL SAMPLE: 341661

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Total Petroleum Hydrocarbons	mg/L	20	16.3	82	64-132	

MATRIX SPIKE SAMPLE: 341662

Parameter	Units	1269658001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Total Petroleum Hydrocarbons	mg/L	<1.1	20.2	13.2	65	64-132	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALITY CONTROL DATA

Project: NPDES-TB WK1

Pace Project No.: 1269769

QC Batch: 87443

Analysis Method: USGS I-3765

QC Batch Method: USGS I-3765

Analysis Description: USGS I-3765 Total Suspended Solids

Associated Lab Samples: 1269769001

METHOD BLANK: 342377

Matrix: Water

Associated Lab Samples: 1269769001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Total Suspended Solids	mg/L	ND	1.0	1.0	07/12/16 12:07	

LABORATORY CONTROL SAMPLE: 342378

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Total Suspended Solids	mg/L	239	230	96	80-120	

SAMPLE DUPLICATE: 342379

Parameter	Units	1269979001 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Suspended Solids	mg/L	154	160	4	10	

SAMPLE DUPLICATE: 342380

Parameter	Units	1269981002 Result	Dup Result	RPD	Max RPD	Qualifiers
Total Suspended Solids	mg/L	28.0	26.0	7	10	

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QUALITY CONTROL DATA

Project: NPDES-TB WK1

Pace Project No.: 1269769

QC Batch: 87475

Analysis Method: EPA 300.0

QC Batch Method: EPA 300.0

Analysis Description: 300.0 IC Anions

Associated Lab Samples: 1269769001

METHOD BLANK: 342589

Matrix: Water

Associated Lab Samples: 1269769001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Sulfate	mg/L	ND	2.0	1.0	07/13/16 00:03	

LABORATORY CONTROL SAMPLE: 342590

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Sulfate	mg/L	50	48.9	98	90-110	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 342591

342592

Parameter	Units	1269769001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Sulfate	mg/L	1010	500	500	1510	1510	100	100	90-110	0	20	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 342593

342594

Parameter	Units	1270031004 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Sulfate	mg/L	17.4	50	50	69.3	70.1	104	105	90-110	1	20	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

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QUALIFIERS

Project: NPDES-TB WK1

Pace Project No.: 1269769

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

LABORATORIES

PASI-DUL Pace Analytical Services - Duluth

PASI-V Pace Analytical Services - Virginia

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QUALITY CONTROL DATA CROSS REFERENCE TABLE


Project: NPDES-TB WK1

Pace Project No.: 1269769

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
1269769001	SD 001 (Seep 020)	EPA 1664 TPH	87251		
1269769001	SD 001 (Seep 020)	USGS I-3765	87443		
1269769001	SD 001 (Seep 020)	EPA 300.0	87475		

REPORT OF LABORATORY ANALYSIS

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	Document Name: Sample Condition Upon Receipt Form	Document Revised: 23Feb2015 Page 1 of 1
	Document No.: F-VM-C-001-Rev.09	Issuing Authority: Pace Virginia, Minnesota Quality Office

Sample Condition Upon Receipt

Client Name:

USS Cooperation

Project #:

WO#: 1269769



Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☒ Client
☐ Commercial ☐ Pace ☐ Other: _____

Tracking Number: _____

Custody Seal on Cooler/Box Present? ☐ Yes ☒ No Seals Intact? ☐ Yes ☒ No

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☒ None ☐ Other: _____ Temp Blank? ☒ Yes ☐ No

Thermometer Used: ☒ 140792808 Type of Ice: ☒ Wet ☐ Blue ☐ None ☐ Samples on ice, cooling process has begun

Cooler Temp Read °C: 4.4 Cooler Temp Corrected °C: 4.7 Biological Tissue Frozen? ☐ Yes ☐ No ☒ NA
Temp should be above freezing to 6°C Correction Factor: +0.3 Date and Initials of Person Examining Contents: AT 7/10/16

Comments:

Chain of Custody Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name and Signature on COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72 hr)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered Volume Received for Dissolved Tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes Date/Time/ID/Analysis Matrix: <u>WT</u>		
All containers needing acid/base preservation will be checked and documented in the pH logbook.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Headspace in VOA Vials (>6mm)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Trip Blank Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

CLIENT NOTIFICATION/RESOLUTION

Field Data Required? ☐ Yes ☐ No

Person Contacted: _____ Date/Time: _____

Comments/Resolution: _____

FECAL WAIVER ON FILE Y N

TEMPERATURE WAIVER ON FILE Y N

Project Manager Review:

M. L. Woods

Date:

7/7/16

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)

Intra-Regional Chain of Custody

Workorder: 1269769

Workorder Name: NPDES-TB WK1

Owner Received Date: 7/6/2016

Due Date: 7/20/2016

Received at:

Send To Lab:

Requested Analysis


Pace Analytical Virginia
315 Chestnut Street
Virginia, MN 55792
Phone (218) 742-1042

Pace Analytical Duluth
4730 Oneota Street
Duluth, MN 55807
Phone (218) 727-6380

Report to:
Melissa M Woods

Item	Sample ID	Sample Type	Collect Date/Time	Lab ID	Matrix	HCL	Preserved Containers	EPA 1664 TPH	LAB USE ONLY
1	SD 001 (Seep 020)	PS	7/6/2016 11:20	1269769001	Water			X	
2									
3									
4									
5									
Transfers									
1	Released By	Date/Time	Received By	Date/Time	Comments				
2									
3									
4									
Cooler Temperature on Receipt 17 °C									
Custody Seal Y or N									
Received on Ice Y or N									
Samples Intact Y or N									

***In order to maintain client confidentiality, location/name of the sampling site, sampler's name and signature may not be provided on this COC document.
This chain of custody is considered complete as is since this information is available in the owner laboratory.

	Document Name:	Document Revised: 22Jan2016
	Sample Condition Upon Receipt Form	Page 1 of 1
	Document No.: F-DUL-C-001-Rev.01	Issuing Authority: Pace Virginia, Minnesota Quality Office

Sample Condition Upon Receipt	Client Name:	Project #:
	IR COC	
Courier:	<input type="checkbox"/> Fed Ex <input type="checkbox"/> UPS <input type="checkbox"/> USPS <input type="checkbox"/> Client <input type="checkbox"/> Commercial <input type="checkbox"/> Pace <input checked="" type="checkbox"/> Other: <u>Take</u>	
Tracking Number:		

Custody Seal on Cooler/Box Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Seals Intact?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Optional: Proj. Due Date:	Proj. Name:
Packing Material:	<input type="checkbox"/> Bubble Wrap <input checked="" type="checkbox"/> Bubble Bags <input type="checkbox"/> None <input type="checkbox"/> Other:	Temp Blank?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Thermometer Used:	<input checked="" type="checkbox"/> B00051	Type of Ice:	<input checked="" type="checkbox"/> Wet <input type="checkbox"/> Blue <input type="checkbox"/> None <input checked="" type="checkbox"/> Samples on ice, cooling process has begun		
Cooler Temp Read °C:	<u>2.0</u>	Cooler Temp Corrected °C:	<u>1.2</u>	Biological Tissue Frozen?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Temp should be above freezing to 6°C	Correction Factor:	<u>-0.8</u> °C	Date and Initials of Person Examining Contents:	<u>PL 7/8/16</u>	
Comments:					

Chain of Custody Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name and Signature on COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	4.
Samples Arrived within Hold Time?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72 hr)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered Volume Received for Dissolved Tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes Date/Time/ID/Analysis Matrix: <u>W.H.</u>		
All containers needing acid/base preservation will be checked and documented in the pH logbook.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	13.
Headspace in VOA Vials (>6mm)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	14.
Trip Blank Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

CLIENT NOTIFICATION/RESOLUTION	Field Data Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Person Contacted:	Date/Time:	
Comments/Resolution:		

FECAL WAIVER ON FILE	Y N	TEMPERATURE WAIVER ON FILE	Y N
Project Manager Review: <u>AP for LMF</u>		Date: <u>7-8-16</u>	
Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)			
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